Amendments to the Claims:

This listing of claims will replace all prior versions, and listings, of claims in the application.

Listing of Claims:

Claims 1-14 (cancelled)

Claim 15 (currently amended) A method of suppressing the effects of translocase deficiency of a prematurely-born human infant comprising the steps of:

identifying an infant suspected of having a translocase deficiency; and

administering to an infant suspected of having a translocase deficiency a composition comprising a pharmaceutically effective amount of an isolated and purified ~~a seven carbon fatty acid selected from triheptanoin or~~ n-heptanoic acid ~~or derivatives thereof~~ to treat the translocase deficiency.

Claim 16-20 Cancelled

Claim 21 (currently amended) The method of any of Claims 15 ~~to 17~~, wherein said composition is provided for consumption in one or more doses, and said doses comprise about 15 to about 40% of the dietary caloric requirement for said infant for 24 hours.

Claim 22 (currently amended) The method of any of Claims 15 ~~to 17~~, wherein said composition is provided for consumption in one or more doses, and said doses comprise about 20 to about 35% of the dietary caloric requirement for said infant for 24 hours.

Claim 23 (currently amended) The method of any of Claims 15 ~~to 17~~, wherein said composition is provided to said human infant in an amount comprising at least 25% of the dietary caloric requirement for said infant.

Claim 24 (previously presented) The method of Claim 21, wherein said composition is provided enterally.

Claim 25 (previously presented) The method of Claim 22, wherein said composition is provided

enterally.

Claim 26 (previously presented) The method of Claim 23, wherein said composition is provided enterally.

Claim 27 (previously presented) The method of Claim 21, wherein said composition is provided parenterally.

Claim 28 (previously presented) The method of Claim 22, wherein said composition is provided~~.~~ parenterally.

Claim 29 (previously presented) The method of Claim 23, wherein said composition is provided parenterally.

Claim 30 (currently amended) A method for suppressing the effects of translocase deficiency of a human infant, comprising

identifying a human infant suspected of having a translocase deficiency;

administering to said human infant a pharmaceutically effective amount of an isolated and purified ~~seven-carbon fatty acid chain composition selected from~~ triheptanoin ~~or n-heptanoic acid~~ adapted for consumption in one or more doses of between 15 and 40% of the dietary caloric requirement for said infant for 24 hours whereby said infant rapidly obtains nutrition from odd carbon fatty acid β-oxidation metabolism~~, and wherein said composition is adapted for consumption in one or more doses, and said doses comprise about 15 to about 40% of the dietary caloric requirement for said infant for 24 hours~~.

Claim 31 cancelled

Claim 32 (currently amended) The method of Claim 30 ~~or 31~~, wherein said composition is administered via enteral administration.

Claim 33 (previously presented) The method of Claim 32, wherein said enteral administration is oral.

Claim 34 (previously presented) The method of Claim 32, wherein said enteral administration is

through a feeding tube.

Claim 35 (currently amended) The method of Claims 30 ~~or 31~~wherein said administration is parenteral.

Claim 36 (currently amended) The method of Claim 30 ~~or 31~~, wherein said composition further comprises infant formula.

Claim 37 (new) A method for suppressing the effects of translocase deficiency of a human infant, comprising

identifying a human infant suspected of having a translocase deficiency;

administering to said human infant a pharmaceutically effective amount of a compound selected from 4-methylhexanoate, 4-methylhexenoate, 3-hydroxy-4-methylhexanoate, 5-methylhexanoate, 5-methylhexenoate and 3-hydroxy-5-methylhexanoate, wherein the compound is adapted for consumption in one or more doses of between 15 and 40% of the dietary caloric requirement for said infant for 24 hours to provide the infant nutrition from odd carbon fatty acid β-oxidation metabolism.

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